## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full) Veterans for a Strong America Action Group	FEC IDENTIFICATION NUMBER ▼  C C00521302
Check If 24-hour report	on M M / D D / Y Y Y Y Y
Full Name (Last, First, Middle Initial) of Payee ATC Consulting Group	Date 10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9411 Bolsa Ave.  Suite D`	Amount
City State Zip Code Westminster CA 92683	6120.00 Transaction ID : SE.4164
	e Sought: House State: NV Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:  MITT ROMNEY  Check	Ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disb	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type  Office	House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President Oppose
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6120.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	6120.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	